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CONFIRMATION NO. 5398

<b>SERIAL NUMBER</b> 10/714,694	<b>FILING OR 371(c) DATE</b> 11/17/2003 <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3772	<b>ATTORNEY DOCKET NO.</b> CheekAir	
<b>APPLICANTS</b> Lowell R. Wedemeyer, Los Angeles, CA; <i>BJ</i>					
<b>** CONTINUING DATA *****</b> <i>BJ</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>BJ</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 02/23/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Signature]</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 41360					
<b>TITLE</b> Cheek path airway and cheek pouch anchor					
<b>FILING FEE RECEIVED</b> 676	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		